



*The Commonwealth of Massachusetts*  
*Alcoholic Beverages Control Commission*  
239 Causeway Street  
Boston, MA 02114  
[www.mass.gov/abcc](http://www.mass.gov/abcc)

**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000001

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: BLUE SKY HOLDINGS INC.

DOING BUSINESS AS MANCHESTER ATHLETIC CLUB

ADDRESS 8 ATWATER AVE.

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: CALLAHAN,  
KEITH S.

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FIRST FLOOR, 6 ROOMS. FIRST LEVEL TENNIS COURTS AND LOCKER ROOMS. 2ND  
LEVEL- OFFICE AND LOUNGE AREA. 3RD LEVEL; RESTAURANT AND BAR. OUTSIDE  
RESTAURANT AND BAR IN AREA OF POOL

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

**We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.**

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

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\_\_\_\_\_

DATE:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000004

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: THE LANDING AT 7 CENTRAL, LLC

DOING BUSINESS AS

ADDRESS 7 CENTRAL ST.

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: SHEA,

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

CHRISTOPHER J.

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

1ST FL. RENOVATIONS: INTERIOR RENOVATIONS & UPDATING- RELOCATE BAR AREA  
2ND. FL.: RENOVATE LADIES RM., ELIMINATE BALCONY ON 2ND. FL. FILL IN APPROX.  
130 SQ. FT. ADDED TO FUNCTION RM.-SEATING TO REMAIN AS FOLLOWS, 132 PLUS 40 IN  
FUNCTION RM. (PLUS SEASONAL DECK)

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EMPLOYER IDENTIFICATION NUMBER:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000005

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: FOREIGN AFFAIRS, LLC

DOING BUSINESS AS FOREIGN AFFAIRS

ADDRESS 26 CENTRAL ST.

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: GAUTHIER,  
FABIENNE BOEL

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FRONT ENTRANCE AND REAR EXITS. 2 FLOORS. FIRST FLR; 3 ROOMS, BAR, LOUNGE AND KITCHEN. PARTIAL CELLAR FOR OPERATING EQUIPMENT

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EMPLOYER IDENTIFICATION NUMBER:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000011

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: MANCHESTER YACHT CLUB

DOING BUSINESS AS

ADDRESS 15 TUCKS POINT RD

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: FADDEN, JOHN J. TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

YACHT CLUB WITH DECK, CLUB ROOM AND FLOATS. SINGLE ENTRANCE AND EXIT FROM PARKING LOT

I hereby certify and swear under penalties of perjury that:

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SIGNED BY

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DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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LOCAL LICENSING AUTHORITY

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DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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**OFF-PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000012

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: CROSBY'S MARKETS, INC.

DOING BUSINESS AS CROSBY'S MARKET PLACE

ADDRESS 3 SUMMER ST

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER:

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

STREET FLOOR FOR SALES AND CELLAR FOR STORAGE. ENTRANCE AND EXIT ON SAID  
CORNER AND EXIT ON RAILROAD SIDE. REAR OF BLDG

I hereby certify and swear under penalties of perjury that:

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SIGNED BY

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DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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**OFF-PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000013

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: LAWRENCE R. CHASE CORP

DOING BUSINESS AS HARRIGAN'S OF MANCHESTER BY THE SEA

ADDRESS 40 BEACH ST

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: CHASE,  
LAWRENCE R.

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE FLOOR, 2 ROOMS. FRONT FOR SALES, REAR FOR STOCK

I hereby certify and swear under penalties of perjury that:

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DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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**OFF-PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000016

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: SEA BREEZE VARIETY, INC.

DOING BUSINESS AS RICHDALE CONVENIENCE STORE

ADDRESS BEACH ST.

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: JOHNSON, KEVIN P. TYPE OF LICENSE: Package Store

CATEGORY: Wine and Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE FLOOR. STORAGE AND SALES AREA. NO CELLAR

I hereby certify and swear under penalties of perjury that:

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DATE:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000024

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: NEIGHBORLY RESTAURANT GROUP INC.

DOING BUSINESS AS CALA'S

ADDRESS 7 BEACH ST

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: BLATCHFORD,  
SCOTT M.

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

72 SEAT FULL SERVICE RESTAURANT, ONE ENTRANCE OFF STREETFRONT, ONE  
ENTRANCE IN REAR TO PARKING LOT/ SEPARATE DINING AND BAR AREAS. KITCHEN,  
STORAGE TO REAR AND BASEMENT STORAGE

I hereby certify and swear under penalties of perjury that:

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DATE:

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EMPLOYER IDENTIFICATION NUMBER:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000025

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: NICHOLAS,LLC

DOING BUSINESS AS NICHOLAS SEAFOOD & GRILLE

ADDRESS 40 BEACH ST # D

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: WEBSTER, DINISE TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE FLOOR CONSISTING OF MAIN ROOM WITH BAR AREA, OFFICE...TWO BATHROOMS,  
ONE STORAGE CLOSET AND A KITCHEN...FRONT ENTRANCE AT PARKING LOT WITH AN  
EXIT AT REAR OF BUILDING

I hereby certify and swear under penalties of perjury that:

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DATE:



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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000026

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: AMARAL-BAILEY POST #113 AM. LEGION DEPT. OF MA.

DOING BUSINESS A

ADDRESS 14 CHURCH STREET

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: CARAWAY,  
DAWN

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

WOOD BUILDING, MAIN ENTRANCE IN FRONT-ONE ENTRANCE IN THE REAR OF THE  
CLUB ROOM-ONE ENTRANCE ON INNER HARBOR SIDE TO STORAGE ROOM-3 EXITS AT  
REAR OF HALL

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000027

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: ESSEX COUNTY CLUB

DOING BUSINESS AS

ADDRESS 153 SCHOOL STREET

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: LEMIRE, BRYANT TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FIRST FLOOR 5 ROOMS. 2ND FLOOR 3 ROOMS. DINING ROOM, PORCH AND BAR ON FIRST FLOOR

I hereby certify and swear under penalties of perjury that:

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DATE:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000028

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: MANCHESTER BATH & TENNIS CLUB INC.

DOING BUSINESS AS

ADDRESS 27 RAYMOND STREET

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER:

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY WOODEN BUILDING WITH BATHHOUSE AND LOCKERS BENEATH

I hereby certify and swear under penalties of perjury that:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 065000029

CITY OR TOWN MANCHESTER

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: SINGING BEACH CLUB, INC.

DOING BUSINESS AS

ADDRESS 117 BEACH STREET

CITY/TOWN: MANCHESTER

STATE: MA

ZIP CODE: 01944

MANAGER: FRITSCH, AMBER TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

117 BEACH STREET...SINGLE STORY CLUBHOUSE CONSISTING OF AN ENTRANCE FOYER, KITCHEN AND DINING ROOM AND RELATED BATHHOUSES, MULTIPLE ENTRANCES AND EXITS

I hereby certify and swear under penalties of perjury that:

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DATE:

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